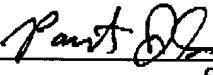


In The United States Patent And Trademark Office

Applicant: Pekka Koivukunnas et al. Date: June 26, 2003
Date Filed: July 10, 2002 Docket No.: FORSAL-35
App. No.: 10/069,203 Art Unit: 1731
For: Method and Arrangement for Examiner: Peter Chin
Surface Treatment of a Paper
and/or Board Web

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Response

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated March 26, 2003, please consider the following arguments:

Patent Attorneys

STIENNON & STIENNON

P.O. Box 1667; Madison, WI 53701-1667; phone (608) 250-4870; Fax (608) 250-4874

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Fax to:

Examiner Peter Chin
U.S. Patent and Trademark Office
Group Art Unit 1731

At Fax Number:

703-872-9310
Technology Center Fax

From:

Patrick J. G. Stiennon

Date:

June 26, 2003

Time:

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FORSAL-35This transmission has 5 pages (including this sheet)

There follows in Application No. 10/069,203.

- * PTO/SB/21 (1 p)
- * Response (3 pp)

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PTO/SB/21 (12-97)

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TRANSMITTAL FORM (To be used for all correspondence after initial filing)		Application Number	10/069,203
		Filing Date	July 10, 2002
		First Named Inventor	Pekka Koivukunnas
		Group Art Unit	1731
		Examiner Name	Peter Chin
Total Number of Pages in This Submission		Attorney Docket Number	FORSAL-35
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (For an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) And Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	
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